

PTO/SB/21 (08-03)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/676,721
		Filing Date	9/30/2003
		First Named Inventor	Burak Acar
		Art Unit	3713
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	4	Attorney Docket Number	S01-254/US

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Ron Jacobs Reg. No. 50,142
Signature	
Date	2-14-05

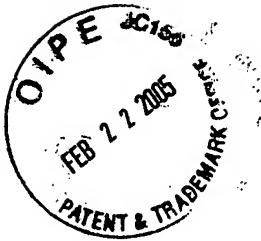
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Attorney Docket: **S01-254/US**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application Number: 10/676,721  
Filing Date: 9/30/2003  
Applicant: Burak Acar  
Application Title: Method for Detecting and Classifying a  
Structure of Interest in Medical Images  
Examiner: Not assigned  
Art Unit: 3713

**CORRECTION REQUEST**

Commissioner for Patents  
P.O. Box 1450, Alexandria, VA 22313-1450

Dear Sir:

Kindly correct the inventor, Burak Acar's residential city.

The filing receipt reads: Bebek, Turkey. This should be changed to read  
**Istanbul, Turkey.**

A marked-up version of the Filing Receipt is enclosed for your reference.

Very respectfully,

  
Ron Jacobs  
(Reg. No. 50,142)



UNITED STATES PATENT AND TRADEMARK OFFICE



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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/676,721	09/30/2003	3713	450	S01-254/US	3	16	3

30869

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*Received*  
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CONFIRMATION NO. 2953

UPDATED FILING RECEIPT



\*OC000000012370871\*

Date Mailed: 04/15/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

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**Domestic Priority data as claimed by applicant**

This appln claims benefit of 60/415,280 09/30/2002

**Foreign Applications**

**If Required, Foreign Filing License Granted: 12/19/2003**

**Projected Publication Date: 07/22/2004**

**Non-Publication Request: No**

**Early Publication Request: No**

**\*\* SMALL ENTITY \*\***

**Title**

Method for detecting and classifying a structure of interest in medical images

**Preliminary Class**

434

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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